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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 18U 101 R1

First Named Inventor Shu et al.

COMPLETE IF KNOWN

Application Number /

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Human Tbx20 Gene and Uses

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s) **Filing Date (MM/DD/YYYY)**

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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OR ☐ Correspondence address below

Name

PATENT TRADEMARK OFFICE

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name Youmin
(first and middle [if any])

Family Name Shu
or Surname

Inventor's
Signature

Youmin Shu

Date 2/26/02

Residence: City Potomac

State MD

Country USA

Citizenship USA

Mailing Address 2508 Chilham Place

Mailing Address

City Potomac

State MD

ZIP 20854

Country USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Wufang
(first and middle [if any])

Family Name Fan
or Surname

Inventor's
Signature

Wufang Fan

Date 2-28-02

Residence: City Germantown

State MD

Country USA

Citizenship USA

Mailing Address 18452 Crownsgate Circle

Mailing Address

City Germantown

State MD

ZIP 20874

Country USA

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Karl F.

Kovacs

Inventor's
Signature

Karl F. Kovacs

Date

2-26-02

Residence: City

Rockville

State

MD

Country

USA

Citizenship

USA

Mailing Address

5 Gruenther Court

Mailing Address

City

Rockville

State

MD

ZIP

20851

Country

USA

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Xuan

Li

Inventor's
Signature

Xuan Li

Date

2/26/02

Residence: City

Silver Spring

State

MD

Country

USA

Citizenship

USA

Mailing Address

14808 Carona Drive

Mailing Address

City

Silver Spring

State

MD

ZIP

20905

Country

USA

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Gilbert

Jay

Inventor's
Signature

Gilbert Jay

Date

02-26-02

Residence: City

North Bethesda

State

MD

Country

USA

Citizenship

USA

Mailing Address

5801 Nicholson Lane

Mailing Address

City

North Bethesda

State

MD

ZIP

20852

Country

USA

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	SHU et al.
Title	Human Tbx20 Gene and Uses
Group Art Unit	
Examiner Name	
Attorney Docket Number	18U 101 R1

I hereby appoint:

☒ Practitioners at Customer Number **OR**

☐ Practitioner(s) named below:

Name	Registration Number



as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Youmin Shu

Signature

Date

2/26/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Name

Wufang Fan

Signature

Date

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Name

Xuan Li

Signature

Date

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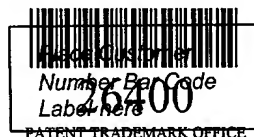
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Name

Karl F. Kovacs IV

Signature

Karl F. Kovacs IV

Date

2-26-02

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Attorney Docket Number

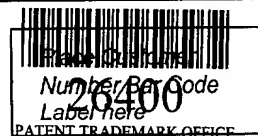
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Name

Gilbert Jay

Signature

Gilbert Jay

Date

02-26-02

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